

FAX COVER PAGE

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Nicholas R. Arnot

Docket:

102179-300

Serial No.:

10/800,066

Art Unit:

3752

Filed:

March 12, 2004

Examiner:

Hwu, Davis D.

Assignee:

Aerojet-General Corporation

Conf. No.:

8432

Title:

PRESSURIZATION SYSTEM FOR FIRE EXTINGUISHERS

Certificate of Mailing or Transmission by Facsimile

Date of Deposit April 18, 2006.

l hereby certify under 37 CFR 1.8(a) that the following correspondence (along with any paper referred to as being attached or enclosed) is being mailed or transmitted via facsimile to (571) 273-8300 on the date indicated above and is addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450:

- (1) Fax Cover Page Certificate of Transmission (1 page)
- (2) Amendment Transmittal Letter (3 pages);
- (3) Response to Office Action (3 pages); and
- (4) Terminal Disclaimer (1 page).

Please contact Anthony P. Gangemi at (203) 498-4395 regarding problems with this multing or transmission.

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Name: Anthony P. Gangemi

APR 1 8 2006

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Signed:

Name: Anthony P. Gangemi

AMENDMENT TRANSMITTAL LETTER

Mail Stop Amendment

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application. The fees have been calculated as shown below:

1. Fee Calculation (37 CFR §1.16)

A. Entity Status		
Applicant claims Small Entity Status.		
B. Excess Claim Fees		
Fee Description	Fee (\$)	Small Entity Fee (\$)
Fach claim over 20 or, for Reissues, each claim over 20 and more than in the	50	25
original patent Each independent claim over 3 or, for Reissues, each independent claim more	200	100
than in the original patent		
Multiple dependent claims	360	180
Total Claims (after Extra Amendment) HP Claims Fee (\$)	7	Fee Paid (\$)
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	_	\$ -
HP = highest number of total claims paid for, if greater than	_	
Independent Claims Extra	_	
(after Amendment) HP Claims Fee (\$)	_	Fee Paid (\$)
minus 3 or HI ³ 2 = 0 x 200 HP = highest number of total claims paid for, if greater than	-	.
-		ee Paid (\$)
Multiple dependent claims? Yes No	\$ 360	\$ -
C. Application Size Fee		
Total Sheets (after Extra (rounded up to a whole Amendment) Sheets number Fee (\$) 10	_	Fee Paid (\$)
D. Other Fee(s)		
Description: 是是認識的學習的學習的學習的學習		0.35元,100元,100元,100元,100元,100元,100元,100元,10
E. Extensions of Time F. Termins	l Disclair	ner
Applicant requests under the provisions of 37 CFR 1.136 (a) to extend the Period for filing a response in the above identified application as follows:		r is attached for which
Months Fee Ees Total Fee Ecc	Small. Enrity Fee 1	
	\$ 65.00	\$ 130.00
### Three months		
Four months \$ 1,590.00 \$ 795.00 \$ -		
Five months \$ 2,160.00 \$ 1,080.00 \$ -		
Method of Paymon of Fces		
Check in the amount of \$ -		
CARL - S	130.00	
Please charge any additional fees or credit overpayment to Deposit Account No. 23-1665.		

Date: April 18, 2006 Reg. No. 42,565 Respectfully submitted, Nicholas R. Arnot

Signature of Attorney Anthony P. Gangemi WIGGIN and DANA LLP

One Century Tower

New Haven, CT 06508-1832 Telephone: (203) 498-4395 Facsimile: (203) 782-2889